Name:

ACLS Updates & New EMS Issues
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1. The major difference between monophasic and biphasic waveform defibrillation is:
    A. The size of the defibrillator
    B. A single versus two phase shock
    C. Pacing capability
    D. Oxygen monitoring

2. Interventions proven to improve the success of resuscitation in VF cardiac arrest include:
    A. CPR, defibrillation, amiodarone
    B. CPR, defibrillation, lidocaine
    C. CPR, defibrillation, epinephrine
    D. All the above

3. Vasopressin is indicated for the treatment of asystole
    A. True
    B. False

4. During pulseless cardiac arrest, IV amiodarone is given as:
    A. 150 mg over 10 minutes
    B. 300 mg IV push
    C. 1 mg/min infusion
    D. 1 gm IV push

5. During cardiac arrest due to VF, vasopressin is given as:
    A. 1 mg repeated every 5 minutes
    B. 1 U/min infusion
    C. 40 Units single IV dose
    D. Vasopressin is not indicated in VF cardiac arrest

6. Side effects associated with rapid administration of IV amiodarone include:
    A. Rash
    B. Tachycardia
    C. Torsade de pointes
    D. Hypotension and bradycardia

7. The use of lidocaine in shock-refractory cardiac arrest is based on:
    A. Randomized human studies showing definite benefit from such treatment
    B. Animal studies
    C. Tradition
    D. No better alternatives

8. Limiting features of using procainamide in cardiac arrest are:
    A. The need for giving the drug as a slow infusion only during a perfusing rhythm
    B. Inability to give the drug as a bolus without serious toxicity
    C. Potential adverse effects in patients with poor heart function
    D. All of the above

9. The most common arrhythmia responsible for sudden cardiac arrest is:
    A. VF
    B. PEA
    C. VT
    D. Asystole

10. A new potential treatment for cardiac arrest:
    A. Hyperbaric oxygen
    B. Hypothermia
    C. BNP (B-type natriuretic peptide)
    D. Steroids

Answers:
1. B
2. A
3. B
4. B
5. C
6. D
7. C
8. D
9. A
10. B